UTILITY PATENT APPLICATION TRANSMITTAL new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	03500.017564	U. \$
First Named Inventor or Application Identifier		98 0/(
MOTOKAZU KOBAYASHI ET AL.		23
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		Express Mail	Label No.	<u> </u>	
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.		ADDR	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450		
Fee Transmittal Form (Submit an original, and a duplicate for fee p	X Fee Transmittal Form (Submit an original, and a duplicate for fee processing)		CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)		
Applicant claims small entity status. See 37 CFR 1.27.		8.	Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)		
3. X Specification Total Pa	nges 37		a (Computer Readable	e Form (CRF)
4. X Drawing(s) (35 USC 113) Total St	neets 3			ation Sequence Lis	·
5. Oath or Declaration Total Pa	ages			CD-ROM or CD-R paper	(2 copies); or
a. Newly executed (original or o					g identity of above copies
			ACCOM	PANYING APPLIC	CATION PARTS
b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) i. DELETION OF INVENTOR(S)		9	37 CFR 3.73	Papers (cover sheet 3(b) Statement e is an assignee)	& document(s)) Power of Attomey
Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. X Application Data Sheet. See 37 CFR 1.76		see 11.	,	inslation Documen	t (if applicable)
		12.	Information Disclosure Conies of		
		13.		Amendment	
		14. X		ceipt Postcard (MPI specifically itemize	
		15.		opy of Priority Docu priority is claimed)	ument(s)
		16.	Other:		
		l l			
17. If a CONTINUING APPLICATION, check ap	propriate box and su	upply the requisite	information:		
Continuation Divisional Prior application information: Examiner	Continua	ation-in-part (CIP)	of prior app Group/Art U	olication No/_	
For CONTINUATION OR DIVISIONAL APPS only: T considered a part of the disclosure of the accompany be relied upon when a portion has been inadvertently	ing continuation or div	isional application a	and is hereby i		* *
	18. CORRE	SPONDENCE ADD	RESS		
X Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or Correspondence address		pondence address below			
NAME					
Address					
				,	
City	State			Zip Code	
Country	Telephone			Fax	<u> </u>

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	11 - 20 =	0	X \$ 18.00 =	\$ 0.00
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	6 - 3 =	3	X \$ 84.00 =	\$ 252.00
	MULTIPLE DEPENDEN	T CLAIMS (if applicable) (37	CFR 1.16(d))	\$280.00 =	\$ 0.00
				BASIC FEE (37 CFR 1.16(a))	\$ 750.00
	<u></u>		Total of	above Calculations =	\$1,002.00
	Reduction by	50% for filing by small er	ntity (Note 37 CFR 1.9, 1	.27, 1.28).	
					\$1,002.00
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19. Sr a. b.	A small e A small e and desir	ntity statement is enclose ntity statement was filed i ed. per claimed.	ed in the prior nonprovision		
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED				
NAME	DOUGLAS W. PINSKY, REGISTRATION NO. 46,994			
SIGNATURE	Dages Wyming			
DATE	SEPTEMBER 16, 2003			

Form #125

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